



03-31-011

HDP/SB/21 based on PTO/SB/21 (08-00)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|---|-----------------------------|-------------------------------|--------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/620,586 | |
| | Filing Date | 7/16/03 | |
| | First Named Inventor | Crowell | |
| | Group Art Unit | 2157 | |
| | Examiner Name | -- | |
| Total Number of Pages in This Submission | | Attorney Docket Number | 0275Y-000591 |

ENCLOSURES (check all that apply)

| | | |
|--|---|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): return receipt postcard |
| Remarks | | The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 02-2548. A duplicate copy of this sheet is enclosed. |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | | | |
|--|----------------------------------|----------------------|----------------|-----------------|--------|
| Firm or Individual name | Harness, Dickey & Pierce, P.L.C. | Attorney Name | Mark D. Elchuk | Reg. No. | 33,686 |
| Signature | | | | | |
| Date | March 30, 2004 | | | | |

CERTIFICATE OF MAILING/TRANSMISSION

| | | | |
|---|----------------|-----------------------------------|-------------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service as express mail in an envelope addressed to: Director of the U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date indicated below. | | | |
| Typed or printed name | Mark D. Elchuk | Express Mail Label No. | EV 406 074 841 US |
| Signature | | Date | March 30, 2004 |

EV 406 074 841 US



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/620,586
Filing Date: 7/16/03
Applicant: Crowell
Group Art Unit: 2157
Examiner: not assigned
Title: System and Method for Data Retrieval in AC power tools
via an AC line cord
Attorney Docket: 0275Y-000591

Director of The United States Patent and Trademark Office
P.O. Box 1450
Alexandria, Virginia 22313-1450

TRANSMITTAL OF FORMAL DRAWINGS

Sir:

Enclosed for filing are four "Replacement Sheets" including formal drawings (Figs. 1-5) for the above-identified patent application. Applicant respectfully requests that the enclosed FORMAL DRAWINGS replace the most recent drawings filed with the application.

Respectfully submitted,

Date: March 30, 2004

By: 
Mark D. Elchuk, Reg. No. 33,686

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